



State of New Hampshire

2009 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2009

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/31/2009

Business ID: 186742

William M. Gardner

Secretary of State

PROMETHEUS GROUP/NH HOLDINGS LIMITED

ONE WASHINGTON ST STE 303

DOVER, NH 03820

ADDRESS OF PRINCIPAL OFFICE:

ONE WASHINGTON ST STE 303

DOVER, NH 03820

REGISTERED AGENT AND OFFICE:

POORE, RICHARD

1 WASHINGTON STREET STE 303

DOVER, NH 03820

ENTITY TYPE: CORPORATION

BUSINESS ID: 186742

STATE OF DOMICILE: NEW HAMPSHIRE

BUSINESS MANAGEMENT AND DEVELOPMENT SERVICES OF EVERY
KIND & DESCRIPTION

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. Richard Poore

STREET 1 Washington Street, Suite 303

CITY/STATE/ZIP Dover Nh 03820

TREAS. Richard Poore

STREET 1 Washington Street, Suite 303

CITY/STATE/ZIP Dover Nh 03820

SEC'Y. Richard Poore

STREET 1 Washington Street, Suite 303

CITY/STATE/ZIP Dover Nh 03820

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Richard Poore

STREET 1 Washington Street, Suite 303

CITY/STATE/ZIP Dover Nh 03820

DIR. Richard Horton

STREET 1Washington St.
Suite 303

CITY/STATE/ZIP Dover NH 03820

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Richard Poore

Please print name and title of signer:

Richard Poore

/

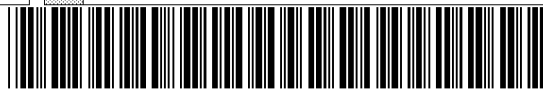
PRESIDENT

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



018674220091000

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

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